

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10817523 FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2	1					
3	1					
4	1					
5	2					
6	3					
7	3					
8	3					
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TOTAL IND.	1					
TOTAL DEP.	14					
TOTAL CLAIMS	15					

	IND		DEP		IND		DEP		IND		DEP	
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